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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your	Steven First name A Middle name Butler Last name and Suffix (Sr., Jr., II, III)	_	Charlotte First name D Middle name Butler Last name and Suffix (Sr., Jr., II, III)
	meeting with the trustee.	(,,,,,,,		(, , , , ,
2.	All other names you have used in the last 8 years	Steven Butler		Charlotte Butler Charlotte Diane Butler
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3688		xxx-xx-8149

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Debtor 1 Steven A Butler
Debtor 2 Charlotte D Butler

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	506 W. Erie, Apt. 23 Maywood, IL 60153	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one:	Check one:			
	banki upicy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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	otor 1 otor 2	Steven A Butler Charlotte D Butler				—	Case r	number (if known)	
Par	t 2:	Tell the Court About \	our Bank	ruptcy Ca	se				
7. The chapter of the Bankruptcy Code you are					rief description of each, see go to the top of page 1 and c			.C. § 342(b) for Individu	uals Filing for Bankruptcy
	cnoc	sing to file under	■ Chap	ter 7					
			☐ Chap	ter 11					
			☐ Chap	ter 12					
			☐ Chap	ter 13					
8.	How	you will pay the fee	abo ord a p	out how yo ler. If your re-printed	entire fee when I file my pour may pay. Typically, if you a attorney is submitting your paddress.	are paying ayment or	the fee yourself, your behalf, you	you may pay with cash r attorney may pay with	n, cashier's check, or money n a credit card or check with
			The but app	e Filing Fe equest that is not requalies to you	e in Installments (Official For t my fee be waived (You ma	m 103A). ay request may do so able to pag	this option only in only if your inco	f you are filing for Chap me is less than 150% of ments). If you choose	oter 7. By law, a judge may, of the official poverty line that this option, you must fill out
9.	bank	you filed for ruptcy within the 3 years?	□ No. ■ Yes.						
		•		District	Northern District of Illinois	When	9/19/14	Case number	14-34155
				District	Northern District of Illinois	When	3/20/09	Case number	09-09413
				District		When		Case number	
10.		ny bankruptcy s pending or being	■ No						
	filed not fi you,	by a spouse who is ling this case with or by a business er, or by an	☐ Yes.						
				Debtor				Relationship to y	/ou
				District		When		Case number, if	known
				Debtor	-			Relationship to y	/ou
				District		When		Case number, if	known
11.		ou rent your	■ No.	Go to li	ne 12.				
	resid	ence?	☐ Yes.	Has yo	ur landlord obtained an evict	ion judgm	ent against you a	nd do you want to stay	in your residence?
					No. Go to line 12.				
					Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	nt About ar	n Eviction Judgme	ent Against You (Form	101A) and file it with this

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	tor 1 Steven A Butler tor 2 Charlotte D Butler	r	Dodani	Case number (if known)		
Part	t 3: Report About Any Bu	ısinesses	You Own as a Sole Proprie	etor		
	Are you a sole proprietor	_	<u> </u>			
	of any full- or part-time business?	No.	Go to Part 4.			
		☐ Yes.	Name and location of bu	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any			
If you have more than one sole proprietorship, use a separate sheet and attach						
	it to this petition.			ox to describe your business:		
			☐ Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))		
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
			Stockbroker (as defined in 11 U.S.C. § 101(53A))			
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
			■ None of the above	re		
13. Are you filing under Chapter 11, the court must know whether you are a small business debtor so that it can set as deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set as deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, stated operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the in 11 U.S.C. 1116(1)(B).			a small business debtor, you must attach your most recent balance sheet, statement of			
	debtor? For a definition of small	■ No.	I am not filing under Cha	pter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Pari	t 4: Report if You Own or	Have Any	/ Hazardous Property or Ar	ny Property That Needs Immediate Attention		
14.	Do you own or have any property that poses or is	■ No.				
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?			
				Number, Street, City, State & Zip Code		

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Debtor 1 Steven A Butler
Debtor 2 Charlotte D Butler

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-04773 Doc 1 Filed 02/20/17 Entered 02/20/17 12:20:06 Desc Main Document Page 6 of 74

	otor 2 Charlotte D Butler	•			Case nu	ımber (if known)		
Par	t 6: Answer These Questi	ions for Rep	orting Purposes					
16.	What kind of debts do you have?		re your debts primarily consur			defined in 11 U.	S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
			re your debts primarily busine noney for a business or investmen					
			No. Go to line 16c.					
			Yes. Go to line 17.					
		16c. S	tate the type of debts you owe th	at are not consumer	debts or bus	siness debts		
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7. Go	o to line 18.				
after any exempt are paid that funds property is excluded and			re paid that funds will be available				ded and administrative expenses	
	administrative expenses are paid that funds will		No					
	be available for distribution to unsecured creditors?] Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000		□ 25,	001-50,000	
	you estimate that you owe?	50-99		☐ 5001-10,000			001-100,000	
		☐ 100-199 ☐ 200-999		☐ 10,001-25,000		⊔ мо	re than100,000	
19.	How much do you	\$ 0 - \$50	.000	□ \$1,000,001 - \$1¢	0 million	□ \$50	00,000,001 - \$1 billion	
	estimate your assets to be worth?	□ \$50,001	- \$100,000	□ \$10,000,001 - \$5			000,000,001 - \$10 billion	
			1 - \$500,000 1 - \$1 million	□ \$50,000,001 - \$ □ \$100,000,001 - \$			0,000,000,001 - \$50 billion are than \$50 billion	
20	Have much do you							
20.	How much do you estimate your liabilities	□ \$0 - \$50 □ \$50.001	,000 - \$100,000	□ \$1,000,001 - \$1 □ \$10,000,001 - \$			00,000,001 - \$1 billion ,000,000,001 - \$10 billion	
	to be?		1 - \$500,000	□ \$50,000,001 - \$			0,000,000,001 - \$50 billion	
		□ \$500,00	1 - \$1 million	□ \$100,000,001 - 3	\$500 million	□ Мо	ore than \$50 billion	
Par	7: Sign Below							
For	you	I have exan	nined this petition, and I declare u	under penalty of perju	ıry that the i	nformation provid	ded is true and correct.	
			osen to file under Chapter 7, I ames Code. I understand the relief a					
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					y to help me fill out this		
		I request re	lief in accordance with the chapte	er of title 11, United S	tates Code,	specified in this	petition.	
I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, and 3571.					y fraud in connection with a h. 18 U.S.C. §§ 152, 1341, 1519,			
		/s/ Steven			Charlotte			
		Steven A Signature o			narlotte D gnature of D			
		Executed o	n February 18, 2017	Fx	ecuted on	February 18,	2017	
		323.00	MM / DD / YYYY			MM / DD / YYY		

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		Document	Page 7 of 74		
Debtor 1 Debtor 2	Steven A Butler Charlotte D Butler		Cas	e number (if known)	
•	attorney, if you are ted by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ed States Code, and have e	explained the relief available u	nder each chapter
•	not represented by ey, you do not need s page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.		•	, ,
		/s/ Nella E. Mariani	Date	February 18, 2017	
		Signature of Attorney for Debtor		MM / DD / YYYY	
		Nella E. Mariani			
		Printed name The Law Offices of Nella E. Mariani, P	P.C.		
		Firm name			
		600 S County Line Road, Suite 2N			
		Bensenville, IL 60106			
		Number, Street, City, State & ZIP Code			

Email address

nellaep@aol.com

Contact phone (312) 307-9411

6257570Bar number & State

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Steven A Butler Debtor 1 Case number (if known) Debtor 2 Charlotte D Butler **Answer These Questions for Reporting Purposes** Part 6: Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S C. § 101(8) as "incurred by an 16a What kind of debts do individual primarily for a personal, family, or household purpose. you have? ■ No. Go to line 16b. Yes. Go to line 17 Are your debts primarily business debts? Business debts are debts that you incurred to obtain 16b. money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17 State the type of debts you owe that are not consumer debts or business debts 16c Lam not filing under Chapter 7. Go to line 18. Are you filing under □ No Chapter 7? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Do you estimate that Yes are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 25 001-50.000 □ 1,000-5,000 18. How many Creditors do 1-49 you estimate that you **50.001-100.000** □ 5001-10.000 **50-99** owe? ☐ More than 100.000 **1**0,001-25,000 □ 100-199 200-999 □ \$500,000.001 - \$1 billion 19. How much do you ☐ \$1,000,001 - \$10 million **\$0 - \$50,000** estimate your assets to ☐ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million ☐ \$50,001 - \$100,000 be worth? ☐ \$10,000,000,001 - \$50 billion □ \$50,000,001 - \$100 million ☐ \$100,001 - \$500,000 ☐ \$100,000,001 - \$500 million ☐ More than \$50 billion ☐ \$500,001 - \$1 million ☐ \$500,000,001 - \$1 billion ☐ \$1,000.001 - \$10 million 20. How much do you ☐ S0 - \$50,000 estimate your liabilities ☐ \$1.000.000.001 - \$10 billion □ \$10,000,001 - \$50 million □ \$50,001 - \$100,000 to be? ☐ \$10.000.000.001 - \$50 billion □ \$50,000,001 - \$100 million **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000.001 - \$500 million ☐ \$500,001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. Foryou If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. Lunderstand the relief available under each chapter, and I choose to proceed under Chapter 7 If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document. I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. Lunderstand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both, 18 U.S.C. §§ 152, 1341, 1519, and 3571

Steven A Butler Signature of Debtor 1

Executed on February 18, 2017

MM / DD / YYYY

سؤلاريهم

Charlotte D Butler

Signature of Debtor 2

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en A Butler		
identify your case:		
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FIII III UIIS IIIIOI	mation to identity your	case.			
Debtor 1	Steven A Butler				
	First Name	Middle Name	Last Name		
Debtor 2	Charlotte D Butle	er			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)				☐ Check if this is amended filing	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

•			
Par	Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,930.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	9,930.00
Par	t 2: Summarize Your Liabilities		
			i abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	2,491.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,907.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	132,262.00
	Your total liabilities	\$	137,660.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,639.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,637.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		
	Vous debte are primarily concurred debte. Consumer debte are those "incurred by an individual primarily for	o noroonal	family or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Debtor 2

Charlotte D Butler

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,461.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Port 4 on Cohodula F/F against the fall and an	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,907.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	13,427.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	16,334.00

Case 17-04773 Doc 1 Filed 02/20/17 Entered 02/20/17 12:20:06 Desc Main Document Page 11 of 74 Fill in this information to identify your case and this filing: Debtor 1 Steven A Butler Middle Name Last Name First Name Debtor 2 Charlotte D Butler (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number П Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes 2009 Do not deduct secured claims or exemptions. Put Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Cadillac Debtor 1 only Model: Creditors Who Have Claims Secured by Property. STS Year: Debtor 2 only Current value of the Current value of the 150.000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information ☐ At least one of the debtors and another \$8,075.00 \$8,075.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$8,075.00

pages you have attached for Part 2. Write that number here......

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

.	Document	Page 12 of 74	
Debtor 1 Debtor 2 Steven A But Charlotte D E		Case number (if kr	own)
6. Household goods and fu Examples: Major appliant☐ No☐ Yes. Describe	urnishings ces, furniture, linens, china, kitchenware		
	Miscellaneous Household Goods (fur sale)	niture purchased at garage	\$300.00
	nd radios; audio, video, stereo, and digital equi phones, cameras, media players, games	pment; computers, printers, scanners; m	usic collections; electronic devices
	Flat Screen (55 inch purchased used)		\$250.00
	figurines; paintings, prints, or other artwork; bons, memorabilia, collectibles	oks, pictures, or other art objects; stamp,	coin, or baseball card collections;
9. Equipment for sports an Examples: Sports, photog musical instru■ No□ Yes. Describe	graphic, exercise, and other hobby equipment;	bicycles, pool tables, golf clubs, skis; car	noes and kayaks; carpentry tools;
10. Firearms Examples: Pistols, rifles No ☐ Yes. Describe	, shotguns, ammunition, and related equipmer	nt	
11. Clothes Examples: Everyday clo □ No ■ Yes. Describe	othes, furs, leather coats, designer wear, shoes	s, accessories	
	Necessary Wearing Apparel		\$900.00
12. Jewelry Examples: Everyday jew ■ No □ Yes. Describe	velry, costume jewelry, engagement rings, wed	lding rings, heirloom jewelry, watches, ge	ms, gold, silver
13. Non-farm animals Examples: Dogs, cats, b No Yes. Describe	pirds, horses		
14. Any other personal and ■ No □ Yes. Give specific info	d household items you did not already list, ormation	including any health aids you did not l	st
	of all of your entries from Part 3, including a number here		d \$1,450.00

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Part 4: Describe Your Financial Assets

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	ebtor 1	Charlotte D Butler	Case number (if known)	
				portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examp ■ No	les: Money you have in your wallet, in your	home, in a safe deposit box, and on hand when you file your petition	n
	☐ Yes			
	Examp	es of money les: Checking, savings, or other financial ac institutions. If you have multiple accour	ecounts; certificates of deposit; shares in credit unions, brokerage hots with the same institution, list each.	ouses, and other similar
	□ No ■ Yes		Institution name:	
		17.1.	Checking Accounts with Guantee Bank	\$5.00
	Examp ■ No	mutual funds, or publicly traded stocks les: Bond funds, investment accounts with but the limit in the limit		
19.	joint ve		porated and unincorporated businesses, including an interest	in an LLC, partnership, and
	■ No □ Yes.	Give specific information about them Name of entity:		
20.	Negotia Non-ne	able instruments include personal checks, c	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
	■ No □ Yes. 0	Give specific information about them Issuer name:		
21.		nent or pension accounts les: Interests in IRA, ERISA, Keogh, 401(k)	, 403(b), thrift savings accounts, or other pension or profit-sharing p	lans
	Yes. I	ist each account separately. Type of account:	Institution name:	
			Retirement Plan Through Employer	\$400.00
22.	Your sh		so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications compani	es, or others
	■ No □ Yes		Institution name or individual:	
23.	Annuiti	es (A contract for a periodic payment of mo	ney to you, either for life or for a number of years)	
	☐ Yes	Issuer name and description.		
24.	26 U.S.C	s in an education IRA, in an account in a C. §§ 530(b)(1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tuition prog	ıram.
	■ No □ Yes	Institution name and descript	ion. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	equitable or future interests in property	(other than anything listed in line 1), and rights or powers exer	cisable for your benefit
		Give specific information about them		

Case 17-04773 Doc 1 Filed 02/20/17 Entered 02/20/17 12:20:06 Desc Main Page 14 of 74 Document Debtor 1 Steven A Butler Debtor 2 Charlotte D Butler Case number (if known) 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements $\hfill \square$ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here......

\$405.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

page 4

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Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$9,930.00

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		Docume	THE TRUCK TO OFF	
Fill in this infor	mation to identify your	case:		
Debtor 1	Steven A Butler			
	First Name	Middle Name	Last Name	
Debtor 2	Charlotte D Butle	r		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is ar amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
STS 2009 Cadillac 150,000 miles Line from Schedule A/B: 3.1	\$8,075.00		\$4,800.00	735 ILCS 5/12-1001(c)
Line Holli Schedule A.B. 3.1			100% of fair market value, up to any applicable statutory limit	
STS 2009 Cadillac 150,000 miles Line from Schedule A/B: 3.1	\$8,075.00		\$784.00	735 ILCS 5/12-1001(b)
ine from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Miscellaneous Household Goods (furniture purchased at garage sale)	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Flat Screen (55 inch purchased used)	\$250.00		\$250.00	735 ILCS 5/12-1001(b)
Line nom Schedule A/B. 7-1			100% of fair market value, up to any applicable statutory limit	
Necessary Wearing Apparel Line from Schedule A/B: 11.1	\$900.00		\$900.00	735 ILCS 5/12-1001(a)
LINE HOITI SCHEUUIE AVB. 11.1			100% of fair market value, up to any applicable statutory limit	

Debtor 1
Debtor 2
Debtor 2
Debtor 2
Debtor 2
Debtor 2
Debtor 3
Steven A Butler
Charlotte D Butler
Case number (if known)

3. Are you claiming a homestead exemption of more than \$160,375?
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

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Yes

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Fill in this information to identify you	r case:				
Debtor 1 Steven A Butler First Name	Middle Name	Last Name			
Debtor 2 Charlotte D Butl (Spouse if, filing) First Name		Last Name			
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLIN	NOIS			
Case number					if this is an led filing
Official Form 106D Schedule D: Creditors	Who Have Claims S	ecured	by Propert	у	12/15
Be as complete and accurate as possible. I s needed, copy the Additional Page, fill it c number (if known).					
Do any creditors have claims secured by ☐ No. Check this box and submit the Yes. Fill in all of the information by	his form to the court with your other se	chedules. Yo	u have nothing else t	o report on this form.	
Part 1: List All Secured Claims 2. List all secured claims. If a creditor has n for each claim. If more than one creditor has much as possible, list the claims in alphabetic	a particular claim, list the other creditors in	n Part 2. As	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Ron's Auto Sales	Describe the property that secures the	e claim:	\$2,491.00	\$8,075.00	\$0.00
Creditor's Name	STS 2009 Cadillac 150,000 mi				
1119 W. Roosevelt Road Maywood, IL 60153	As of the date you file, the claim is: Chapply. Contingent	neck all that			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mo car loan)	ortgage or secu	red		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
☐ At least one of the debtors and another☐ Check if this claim relates to a community debt	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)				
Date debt was incurred 2/16	Last 4 digits of account numbe	er			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$2,491.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$2,491.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 17-04773 Doc 1 Filed 02/20/17 Entered 02/20/17 12:20:06 Desc Main Page 19 of 74 Document Fill in this information to identify your case: Debtor 1 Steven A Butler Middle Name First Name Last Name Debtor 2 Charlotte D Butler (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known) Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? ☐ No. Go to Part 2 List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed. identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount amount 2.1 Illinois Department of Revenue Last 4 digits of account number \$179.00 \$686.00 Priority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. P.O. Box 64338 Springfield, IL 62794 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ■ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: ■ Domestic support obligations ☐ At least one of the debtors and another

■ Taxes and certain other debts you owe the government

☐ Claims for death or personal injury while you were intoxicated

☐ Other. Specify

☐ Check if this claim is for a community debt

Is the claim subject to offset?

■ No

☐ Yes

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ebtor 2 Charlotte D Butler	Case	`		
IRS	Last 4 digits of account number	\$2,042.00	\$2,042.00	\$0.0
Priority Creditor's Name Special Procedures P.O. Box 7346 Philadelphia, PA 19101	When was the debt incurred?			
Number Street City State Zlp Code	As of the date you file, the claim is: Check a	all that apply		
Who incurred the debt? Check one.	☐ Contingent			
☐ Debtor 1 only	☐ Unliquidated			
Debtor 2 only	☐ Disputed			
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ At least one of the debtors and another	☐ Domestic support obligations			
☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Taxes and certain other debts you owe the ☐ Claims for death or personal injury while you	-		
■ No □ Yes	Other. Specify			
Do any creditors have nonpriority unsecured claim ☐ No. You have nothing to report in this part. Submit ☐ Yes. List all of your nonpriority unsecured claims in the	this form to the court with your other schedules. alphabetical order of the creditor who holds			
No. You have nothing to report in this part. Submit■ Yes.	this form to the court with your other schedules. alphabetical order of the creditor who holds laim. For each claim listed, identify what type of company to the creditor who holds laim.	claim it is. Do not list claims	already included in Pa	art 1. If more on Page of
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. American Infosource LP as Agent	this form to the court with your other schedules. e alphabetical order of the creditor who holds laim. For each claim listed, identify what type of or creditors in Part 3.If you have more than three not be also as a sec	claim it is. Do not list claims	s already included in Pa s fill out the Continuation	art 1. If more on Page of im
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. American Infosource LP as Agent for Nonpriority Creditor's Name Midland Funding	this form to the court with your other schedules. alphabetical order of the creditor who holds laim. For each claim listed, identify what type of company to the creditor who holds laim.	claim it is. Do not list claims	s already included in Pa s fill out the Continuation	art 1. If more on Page of im
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■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. American Infosource LP as Agent for Nonpriority Creditor's Name Midland Funding P.O. Box 268941 Oklahoma City, OK 73126 Number Street City State ZIp Code	this form to the court with your other schedules. e alphabetical order of the creditor who holds laim. For each claim listed, identify what type of correditors in Part 3.If you have more than three not be creditors. Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check	claim it is. Do not list claims onpriority unsecured claim	s already included in Pa s fill out the Continuation	art 1. If more on Page of im
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. American Infosource LP as Agent for Nonpriority Creditor's Name Midland Funding P.O. Box 268941 Oklahoma City, OK 73126 Number Street City State Zlp Code Who incurred the debt? Check one.	this form to the court with your other schedules. alphabetical order of the creditor who holds laim. For each claim listed, identify what type of coreditors in Part 3.lf you have more than three notes that the count number when was the debt incurred? As of the date you file, the claim is: Check Contingent	claim it is. Do not list claims onpriority unsecured claim	s already included in Pa s fill out the Continuation	art 1. If more on Page of im
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other Part 2. American Infosource LP as Agent for Nonpriority Creditor's Name Midland Funding P.O. Box 268941 Oklahoma City, OK 73126 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only	this form to the court with your other schedules. alphabetical order of the creditor who holds laim. For each claim listed, identify what type of coorditors in Part 3.lf you have more than three notes that the coorditors in Part 3.lf you have more than three notes that the coordinate is the coordinate of the coordinate is the coordinate in the coordinate is the coordinate in the coordinate in the coordinate is the coordinate in the coordinate in the coordinate is the coordinate in the coordinate in the coordinate is the coordinate in the coordinate in the coordinate in the coordinate is the coordinate in the coordin	claim it is. Do not list claims onpriority unsecured claim	s already included in Pa s fill out the Continuation	art 1. If more on Page of im
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□ No. You have nothing to report in this part. Submit ▼ yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. American Infosource LP as Agent for Nonpriority Creditor's Name Midland Funding P.O. Box 268941 Oklahoma City, OK 73126 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only ■ Debtor 1 and Debtor 2 only	this form to the court with your other schedules. e alphabetical order of the creditor who holds laim. For each claim listed, identify what type of creditors in Part 3.lf you have more than three notes that the country of the creditors in Part 3.lf you have more than three notes that the creditors in Part 3.lf you have more than three notes the creditors in Part 4.lf you have the creditors in Part 4.lf y	ckaim it is. Do not list claims on priority unsecured claim	s already included in Pa s fill out the Continuation	art 1. If more on Page of im
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□ No. You have nothing to report in this part. Submit □ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. American Infosource LP as Agent for Nonpriority Creditor's Name Midland Funding P.O. Box 268941 Oklahoma City, OK 73126 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	this form to the court with your other schedules. Palphabetical order of the creditor who holds laim. For each claim listed, identify what type of correditors in Part 3. If you have more than three not creditors in Part 3. If you have more than three not creditors in Part 3. If you have more than three not creditors in Part 3. If you have more than three not creditors in Part 3. If you have more than three not creditors in Part 3. If you have more than three not creditors in Part 3. If you have more than three not creditors in Part 3. If you have more than three not creditors in Part 3. If you have more than three not creditors in Part 3. If you have more than three not creditors in Part 3. If you have more than three not creditors in Part 4. If you have more than three not creditors in Part 4. If you have more than three not creditors in Part 3. If you have more than three not creditors in Part 3. If you have more than three not creditors in Part 3. If you have more than three not creditors in Part 4. If you have more tha	ck all that apply	s already included in Pass fill out the Continuation Total cla	art 1. If more on Page of im
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. American Infosource LP as Agent for Nonpriority Creditor's Name Midland Funding P.O. Box 268941 Oklahoma City, OK 73126 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other schedules. e alphabetical order of the creditor who holds laim. For each claim listed, identify what type of or creditors in Part 3.If you have more than three notes that the count number when was the debt incurred? As of the date you file, the claim is: Check the Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim Student loans Obligations arising out of a separation as	ck all that apply ck all that apply greement or divorce that y , and other similar debts	s already included in Pass fill out the Continuation Total cla	art 1. If more on Page of .im

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	Steven A Butler Charlotte D Butler	Case number (if know)	
4.2	American Infosource LP as Agent for	Last 4 digits of account number	\$388.00
I	Nonpriority Creditor's Name Midland Funding P.O. Box 268941	When was the debt incurred?	
	Oklahoma City, OK 73126		
ī	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
I	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	s the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
	American Web Loan, Inc.	Last 4 digits of account number 5420	\$2,375.00
2	Nonpriority Creditor's Name 2128 North 14th Street, #1 Box 130 Ponca City, OK 74601	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
,	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
I	Debtor 2 only	☐ Unliquidated	
1	Debtor 1 and Debtor 2 only	☐ Disputed	
I	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
1	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	s the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Loan	
	AmeriCash Loans	Last 4 digits of account number	\$1,275.00
I	Nonpriority Creditor's Name P.O. Box 184	When was the debt incurred?	
	Des Plaines, IL 60016 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
,	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ı	s the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
1	☐ Yes	Other. Specify Loan	

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Debtor 1 Steven A Butler Debtor 2 Charlotte D Butler Case number (if know) 4.5 AmeriCashLoans.Net Last 4 digits of account number 0437 \$1,163.00 Nonpriority Creditor's Name P.O. Box 184 When was the debt incurred? Des Plaines, IL 60016 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Loan 4.6 Arlington Ridge Pathology Last 4 digits of account number L094 \$31.00 Nonpriority Creditor's Name 520 E. 22nd St. When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only □ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.7 \$400.00 **Armor Systems** Last 4 digits of account number 8195 Nonpriority Creditor's Name 1700 Kiefer Drive, Suite 1 When was the debt incurred? Zion, IL 60099 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debt	or 2 Charlotte D Butler	Case number (if know)	
4.8	Aspire Visa	Last 4 digits of account number 4472	\$467.00
	Nonpriority Creditor's Name c/o Capital Management Services, LP	When was the debt incurred?	
	698 1/2 South Ogden Street Buffalo, NY 14206	_	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card Purchases	
4.9	AT & T	Last 4 digits of account number	\$89.00
	Nonpriority Creditor's Name P.O. Box 8100 Aurora, IL 60507	When was the debt incurred?	***************************************
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Utilities	
4.1 0	AT & T	Last 4 digits of account number 7755	\$133.00
	Nonpriority Creditor's Name P.O. Box 5080	When was the debt incurred?	
	Carol Stream, IL 60197 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
	Debtor 1 only	■ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify	

Debtor 1 Steven A Butler

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Debto Debto	r 1 Steven A Butler r 2 Charlotte D Butler	Case number (if know)	
4.1 1	AT & T Mobility	Last 4 digits of account number 1871	\$1,184.00
	Nonpriority Creditor's Name P.O. Box 6146	When was the debt incurred?	
	Carol Stream, IL 60197 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	AT & T Mobility Nonpriority Creditor's Name	Last 4 digits of account number	\$245.00
	c/o AT & T Services One AT & T Way, Suite 3A 104	When was the debt incurred?	
	Redminster, NJ 07921 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	BestPractices of Northwest. SC	Last 4 digits of account number 0101	\$17.00
	Nonpriority Creditor's Name P.O. Box 758682 Baltimore, MD 21275	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Bills	
	00	- Other, Specify	

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Debtor Debtor	Steven A Butler Charlotte D Butler	Case number (if know)	
4.1	Cash Direct Express Nonpriority Creditor's Name c/o Alliance Asset P.O. Box 1259 Oaks, PA 19456	Last 4 digits of account number 1173 When was the debt incurred?	\$688.00
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes		
	☐ Yes	Other. Specify Loan	
4.1 5	CEPAmerica Illinois LLP Nonpriority Creditor's Name	Last 4 digits of account number 6592	\$243.00
	P.O. Box 582663 Modesto, CA 95358	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Cerastes, LLC	Last 4 digits of account number	\$510.00
	Nonpriority Creditor's Name c/o Weinstein, Pinson, & Riley 2001 Western Ave., Suite 400 Seattle, WA 98121	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	_	
	□ 162	Other. Specify	

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2 Charlotte D Butler	Case number (if know)	
Charter Bank	Last 4 digits of account number 2624	\$140.0
Nonpriority Creditor's Name c/o Universal Fidelty, LP P.O. Box 219785	When was the debt incurred?	
Houston, TX 77218 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	П	
Debtor 2 only	☐ Contingent	
_	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐ Student loans	
Check if this claim is for a community debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
163	Other. Specify	
City of Chicago Nonpriority Creditor's Name	Last 4 digits of account number	\$366.
c/o Linegarger,Goggan, Blair, et al P.O. Box 06152 Chicago, IL 60606	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Fines	
0	0000	\$450
Comcast Cable Nonpriority Creditor's Name	Last 4 digits of account number 0898	\$158.
P.O. Box 3002 Southeastern, PA 19398	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	■ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	

Debtor 1 Steven A Butler

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Debtor Debtor	1 Steven A Butler 2 Charlotte D Butler	Case number (if know)	
4.2	Comcast Cable	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name P.O. Box 3002	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.2	Commonwealth Edison	Last 4 digits of account number	\$898.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 3 Lincoln Centre	When was the debt incurred?	
	Oak Brook Terrace, IL 60181 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	П	
	Debtor 2 only	☐ Contingent	
	Debtor 1 and Debtor 2 only	☐ Unliquidated	
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify	
4.2	Condell Medical Center	Last 4 digits of account number 0497	\$125.00
2	Nonpriority Creditor's Name	Last 4 digits of account number U497	\$123.00
	c/o Harris & Harris, LTD 111 W. Jackson Blvd. Suite 400 Chicago, IL 60604	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	

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Debtor Debtor	Steven A Butler Charlotte D Butler		Case number (if know)	
4.2	Diversified Consultant	Last 4 digits of account number	0590	\$200.00
	Nonpriority Creditor's Name P O Box 551268 Jacksonville, FL 32255	When was the debt incurred?	Opened 10/16	
-	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Collection	Attorney Comcast	
4.2	Harris	Last 4 digits of account number	6122	\$421.00
	Nonpriority Creditor's Name 111 West Jackson Boulevard Chicago, IL 60604	When was the debt incurred?		
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Northwest	Community Hospital	
4.2 5	Harris	Last 4 digits of account number	6743	\$75.00
	Nonpriority Creditor's Name 111 West Jackson Boulevard Chicago, IL 60604	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir	g plans, and other similar debts	
	☐ Yes	Other. Specify Northwest	Community Hospital	

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Debtor Debtor	Steven A Butler Charlotte D Butler	Case number (if know)	
4.2	Illinois Dept. of Employment Sec. Nonpriority Creditor's Name P.O. Box 4385 Chicago, IL 60680	Last 4 digits of account number When was the debt incurred?	\$9,747.00
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify Overpayment of Benefits	
4.2	Jefferson Capital Systems	Last 4 digits of account number	\$1,931.00
	Nonpriority Creditor's Name P.O. Box 7999 Spirit Cloud MN 56202	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	☐ Debtor 2 only	☐ Contingent	
	Debtor 1 and Debtor 2 only	☐ Unliquidated	
		☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes		
	⊔ Yes	Other. Specify	
4.2	LVNV Funding LLC	Last 4 digits of account number 8472	\$972.00
	Nonpriority Creditor's Name c/o Northland Group P.O. Box 390846	When was the debt incurred?	
	Minneapolis, MN 55439 Number Street City State Zlp Code	As of the date you file the claim in Observal, all that such	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	□ otit	
	Debtor 2 only	☐ Contingent ☐ Unliquidated	
	Debtor 1 and Debtor 2 only		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Credit Card Purchases	
		opoon,	

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Debto:	r 1 Steven A Butler r 2 Charlotte D Butler	Case number (if know)	
4.2	Mark Damba		¢20,000,00
9	Mark Bamba Nonpriority Creditor's Name	Last 4 digits of account number	\$20,000.00
	323 S. Lancelot Lane Palatine, IL 60074	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	_	
	<u> </u>	Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify remaining balance on prior lease	
4.3	Medical Recovery Specialist Inc Nonpriority Creditor's Name	Last 4 digits of account number 4146	\$300.00
	2250 E. Devon Aven., Suite 352 Des Plaines, IL 60018	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical Bills	
4.3	Nicor Gas	Last 4 digits of account number 1485	\$105.00
	Nonpriority Creditor's Name c/o Harris & Harris, LTD	When was the debt incurred?	
	111 West Jackson Blvd., Suite 400 Chicago, IL 60604		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	<u> </u>	
	— 100	Other. Specify	

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Debto Debto	or 1 Steven A Butler Charlotte D Butler		Case number (if know)	
4.3	Nicor Gas	Last 4 digits of account number	0522	\$75.00
	Nonpriority Creditor's Name P.O Box 5407	When was the debt incurred?		
	Carol Stream, IL 60197 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Student loans	a ciaiii.	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other. Specify Utilities		
4.3	Northwest Community Hosp	Last 4 digits of account number		\$502.00
	Nonpriority Creditor's Name c/o Ronald J. Henning, P.C. P.O. Box 4106	When was the debt incurred?		
	Saint Charles, IL 60174 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	nation agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.3	Northwest Community Hospital Nonpriority Creditor's Name	Last 4 digits of account number	5417	\$1,552.00
	c/o Harris & Harris, LTD 111 West Jackson Blvd., Suite 400 Chicago, IL 60604	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Bil		
	— 100	- Other. Specify Micarda Dir	· -	

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Debtor Debtor	Steven A Butler Charlotte D Butler		Case number (if know)	
4.3 5	Northwest Community Hospital	Last 4 digits of account number	0793	\$1,352.00
	Nonpriority Creditor's Name c/o Harris & Harris, LTD 111 West Jackson Blvd., Suite 400 Chicago, IL 60604 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical Bil	Is	
4.3	Northwest Community Hospital	Last 4 digits of account number	8814	\$1,552.00
	Nonpriority Creditor's Name 28079 Network Place Chicago, IL 60673	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Medical Bil	ls	
4.3	Northwest Community Hospital Nonpriority Creditor's Name	Last 4 digits of account number	1365	\$150.00
	28079 Network Place Chicago, IL 60673	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Medical Bil	ls	

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Debtor Debtor	1 Steven A Butler 2 Charlotte D Butler		Case number (if know)	
	- Chanotte D Dutier			
4.3	Northwest Community Hospital	Last 4 digits of account number	7999	\$6,964.00
0	Nonpriority Creditor's Name	East 4 digits of account number		***,***
	c/o MiraMed Revenue Group	When was the debt incurred?		
	991 Oak Creek Drive			
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	• ,		
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Bil	ls	
4.3			0704	
9	Northwest Community Hospital	Last 4 digits of account number	9701	\$255.00
	Nonpriority Creditor's Name c/o Stanislaus Credit Control Servi	When was the debt incurred?		
	914 14th Street			
	Modesto, CA 95353			
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	_		
	_	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Lateta.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	■ Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	·		
	□ Yes	Other. Specify Medical Bil	15	
4.4	Northwest Community Hospital	Last 4 digits of account number	0595	\$740.00
	Nonpriority Creditor's Name	-		
	28079 Network Place	When was the debt incurred?		
	Chicago, IL 60673 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	• ,	,	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Medical Bil	Is	

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Debt Debt	or 1 Steven A Butler Or 2 Charlotte D Butler		Case number (if know)	
4.4 1	Northwest Community Hospital	Last 4 digits of account number	2661	\$5,946.00
	Nonpriority Creditor's Name 28079 Network Place Chicago, IL 60673	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other Specify Medical Bil	İs	
4.4	Northwest Community Pain Center	Last 4 digits of account number	8295	\$130.00
	Nonpriority Creditor's Name 880 W. Central Road, Suite 3800 Arlington Heights, IL 60005	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical Bil	<u>s</u>	
4.4	Northwest Radiology Associates	Last 4 digits of account number	5146	\$370.00
3	Nonpriority Creditor's Name 520 E. 22nd St	When was the debt incurred?		*****
	Lombard, IL 60148 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	ı cıaım:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	· ·	Debts to pension or profit-sharin	g plans, and other similar debts	
	■ No			
	Yes	Other. Specify Medical Bil	IS	

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Debt Debt	for 1 Steven A Butler Charlotte D Butler		Case number (if know)	
4.4 4	Northwest Suburban Pain Center	Last 4 digits of account number	8295	\$130.00
	Nonpriority Creditor's Name 880 W. Central Rd., Suite 3800 Arlington Heights, IL 60005	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical Bil	ls	
4.4 5	Peoples Gas Light & Coke	Last 4 digits of account number		\$1,880.00
<u> </u>	Nonpriority Creditor's Name c/o Bankruptcy Dept. 200 E. Randolph Drive Chicago, IL 60601	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
4.4 6	Peoples Gas Light & Coke Co Nonpriority Creditor's Name	Last 4 digits of account number		Unknown
	200 E Randolph Drive Chicago, IL 60601	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		

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Debto Debto	r 1 Steven A Butler r 2 Charlotte D Butler		Case number (if know)	
4.4	Santander Consumer USA	Last 4 digits of account number	5285	\$1,931.00
	Nonpriority Creditor's Name c/o Capital Management Service, LP 698 1/2 S. Ogden Street Buffalo, NY 14206	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans		
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	ration agreement or divorce that you did not	
	☐ Yes	■ Other. Specify Medical Bil	= :	
4.4 8	Santander Consumer USA	Last 4 digits of account number	1000	Unknown
	Nonpriority Creditor's Name c/o Portfolio Recovery Assoc. P.O. Box 4115 Concord, CA 94524	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ■ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	I claim: ration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin		
	□ Yes	_		
4.4 9	Silver Cloud Financial, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	5709	Unknown
	635 East Hwy 20, C Upper Lake, CA 95485 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	and a standard and a	
	■ No	Debts to pension or profit-sharin	g pians, and other similar debts	
	Yes	Other. Specify Loan		

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Debt Debt	or 1 Steven A Butler or 2 Charlotte D Butler		Case number (if know)	
4.5 0	SRA Associates	Last 4 digits of account number	1994	\$32,242.00
	Nonpriority Creditor's Name P.O. Box 4115 Concord, CA 94524	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.5 1	Sure Advance	Last 4 digits of account number	8167	\$565.00
	Nonpriority Creditor's Name c/o P.O Box 1259 Oaks, PA 19456	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.5 2	System & Services Technologies, Inc	Last 4 digits of account number		\$12,639.00
,	Nonpriority Creditor's Name 4315 Pickett Road Saint Joseph, MO 64503	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other. Specify		

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Debt	or 2 Charlotte D Butler	Case number (if know)	
4.5	T-Mobile	Last 4 digits of account number 0237	\$2,889.00
3]	Nonpriority Creditor's Name c/o Diversified Consultants P.O. Box 571 Fort Mill, SC 29716	When was the debt incurred?	Ψ2,003.00
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.5	TCF	Last 4 digits of account number	\$128.00
+	Nonpriority Creditor's Name		4.20.00
	c/o Heller & Frisone, Attorneys 33 N LaSalle St., Suite 1200 Chicago, IL 60602	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.5 5	US Bank Nonpriority Creditor's Name	Last 4 digits of account number 5778	\$315.00
	Attn: Bankruptcy Dept. 1555 N. Rand Road	When was the debt incurred?	
	Palatine, IL 60074 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Bank Fees	
	□ 169	Titler. Specify Dalik i CC3	

Debtor 1 Steven A Butler

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Debto Debto	r 1 Steven A Butler r 2 Charlotte D Butler	Case number (if know)				
4.5	US Bank	Last 4 digits of account number 4567	Unknown			
6	Nonpriority Creditor's Name Attn: Bankruptcy Dept 1555 N. Rand Road	When was the debt incurred?	<u> </u>			
	Palatine, IL 60074 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Bank Fees				
4.5	US Department of Education	Last 4 digits of account number	\$13,427.00			
	Nonpriority Creditor's Name P.O. Box 16448 Saint Paul, MN 55116	When was the debt incurred?				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	■ Student loans				
	debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	☐ Other. Specify				
		Student Loans Nondischargable				
4.5 8	Wells Fargo	Last 4 digits of account number 0449	\$247.00			
U	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 621 W. Dundee Road	When was the debt incurred?	·			
	Palatine, IL 60074 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Bank Fees				
		5 opoon,				

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Debtor Debtor			Butler D Butler		Case r	number (if know)		
4.5	Wells F	argo) Bank	Last 4 digits of account number	3236	;	\$593.00	
9	Nonpriori	ty Cred	ditor's Name x 129	When was the debt incurred?				
			NJ 08086 City State Zlp Code	As of the date you file, the claim i	s: Checl	k all that anniv		
			the debt? Check one.	As of the date you me, the claim i	3. Oneo	k all that apply		
	☐ Debto			☐ Contingent				
	☐ Debto		•	☐ Unliquidated				
			d Debtor 2 only	☐ Disputed				
	_			Type of NONPRIORITY unsecured	l claim·			
	_		of the debtors and another	☐ Student loans	· Oldiiii			
	☐ Checl debt	k if thi	s claim is for a community	_	ration or	greement or divorce that you did not		
		aim su	bject to offset?	report as priority claims				
	No			Debts to pension or profit-sharin	g plans,	and other similar debts		
	☐ Yes			Other. Specify				
4.6 0	Wells F	_		Last 4 digits of account number			\$593.00	
	P.O. Bo	ox 50	ditor's Name 58 R 97208	When was the debt incurred?				
	Number S	Street	City State Zlp Code	As of the date you file, the claim i	s: Checl	k all that apply		
	_		he debt? Check one.					
	☐ Debto		•	☐ Contingent				
	☐ Debto	or 2 onl	у	☐ Unliquidated				
	Debto	r 1 an	d Debtor 2 only	☐ Disputed				
	☐ At lea	st one	of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community			Student loans				
	debt Is the cla	aim su	bject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration aç	greement or divorce that you did not		
	No			Debts to pension or profit-sharing	g plans,	and other similar debts		
	☐ Yes			Other. Specify				
is tryi have notific Part 4:	nis page or ng to colle more than ed for any	nly if y ect fro one o debts the Au	m you for a debt you owe to some reditor for any of the debts that yo in Parts 1 or 2, do not fill out or su mounts for Each Type of Unsectain types of unsecured claims.	nt your bankruptcy, for a debt that yone else, list the original creditor in u listed in Parts 1 or 2, list the addibinit this page.	Parts 1 tional cr	ady listed in Parts 1 or 2. For example or 2, then list the collection agency hereditors here. If you do not have addit gurposes only. 28 U.S.C. §159. Add to	ere. Similarly, if you ional persons to be	
			B		•	Total Claim		
	Total	6а.	Domestic support obligations		6a.	\$0.00		
cl	aims							
from F	Part 1	6b.	Taxes and certain other debts yo	=	6b.	\$ 2,907.00		
		6c. 6d.	Claims for death or personal inju Other. Add all other priority unsecu	•	6c. 6d.	\$ 0.00 \$ 0.00		
		ou.	other. Add all other priority drisecu	red claims. Write that amount here.	ou.	\$	\neg	
		6e.	Total Priority. Add lines 6a through	n 6d.	6e.	\$\$		
						Total Claim		
	Total	6f.	Student loans		6f.	\$ 13,427.00		
	aims	6g.	Obligations arising out of a sepa you did not report as priority clai		6g.	\$ 0.00		

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Debtor 1 Debtor 2 Steven A Butler Charlotte D Butler Case number (if know)

6h. Debts to pension or profit-sharing plans, and other similar debts
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
6j. Total Nonpriority. Add lines 6f through 6i.
6j. \$ 132,262.00

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Document Page 42 of 74 Fill in this information to identify your case: Debtor 1 Steven A Butler Middle Name Last Name First Name Debtor 2 **Charlotte D Butler** (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known)

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number,	whom you have the Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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Page 43 of 74 Document Fill in this information to identify your case: Debtor 1 Steven A Butler Middle Name Last Name First Name Debtor 2 Charlotte D Butler (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106H **Schedule H: Your Codebtors** 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. ■ No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Name, Number, Street, City, State and ZIP Code Check all schedules that apply: 3.1 ☐ Schedule D, line Name ☐ Schedule E/F, line _ ☐ Schedule G, line Number Street City State ZIP Code 3.2 ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line

Street

State

Number

City

ZIP Code

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Fill	in this information to	o identify your c	case:					
Deb	otor 1	Steven A B	utler	_				
Debtor 2 Charlotte D Butler (Spouse, if filing)					_			
Uni	ted States Bankrupt	cy Court for the	_					
	se number			_	С	check if this is:		
(If kr	nown)				[An amended filing		
				A supplement showing postpetition chapter 13 income as of the following date:				
\bigcirc	fficial Form	1061						
						MM / DD/ YYYY		
S	Schedule I: Your Income					12/15		
sup spo	plying correct info use. If you are sep ch a separate shee	rmation. If you arated and you	are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your spouse i ith you, do not include inforr	s living v nation ak	Debtor 2), both are equally responsible for vith you, include information about your bout your spouse. If more space is needed, e number (if known). Answer every question.		
4	Fill in your emplo	wmont						
1.	information.	ymem		Debtor 1		Debtor 2 or non-filing spouse		
	If you have more t		Employment status	■ Employed		■ Employed		
	information about		p,	☐ Not employed		☐ Not employed		
	employers.		Occupation	Driver		Customer Service		

Part 2: Give Details About Monthly Income

Include part-time, seasonal, or

Occupation may include student

or homemaker, if it applies.

self-employed work.

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

Cargo Line

1401 N. Wood Dale Road

7 months

Wood Dale, IL 60191

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

Employer's name

Employer's address

How long employed there?

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

ling spouse		For Deptor 1		
0.00	\$	4,463.00	\$	2.
0.00	+\$	0.00	+\$	3.
0.00	\$	4,463.00	\$	4.

For Dobton 4

AT & T

95 W. Algonquin Road

12 years

Arlington Heights, IL 60005

Official Form 106I Schedule I: Your Income page 1

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Steven A Butler Debtor 1 Debtor 2 **Charlotte D Butler** Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$ 4.463.00 0.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 975.00 0.00 Mandatory contributions for retirement plans 5b. 5b. \$ 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 Required repayments of retirement fund loans 5d. 5d. 0.00 0.00 5e. Insurance 5e. 79.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. \$ \$ 0.00 0.00 5h. Other deductions. Specify: 5h.+ \$ 0.00 \$ 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 1,054.00 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7 \$ 3,409.00 0.00 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. \$ 0.00 0.00 8a \$ 8h. Interest and dividends 8b. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. \$ 0.00 \$ 0.00 Specify: 8g. 8g. Pension or retirement income \$ \$ 0.00 0.00 Other monthly income. Specify: Disability 8h.+ \$ 8h. \$ 1,230.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 0.00 1,230.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ \$ 3,409.00 1,230.00 \$ 4,639.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. Specify: 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 4,639.00 12. \$ applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. П Yes. Explain: Co-debtor's disability benefits to expire on 3/2017.

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Debtor 1 Steven A Butler	Filli	n this informa	tion to identify yo	our case:			1			
Debitor 2 Charlotte D Butler Charlotte D Butler A supplement showing postpetition chapter (Spouse, If filing) A supplement showing postpetition chapter (3 dependents as of the following date: MM / DD / YYYYY							Ch	ook if	this is:	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	Debi	Steven A Butler								
Unified States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (If known) Official Form 106J Schedule J: Your Expenses 12/1 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. The service of the content of the cont			Charlotte D E	Butler						
Official Form 106J Schedule J: Your Expenses 12/1 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part I: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Go to line 2. Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and General G	(Spc	ouse, if filing)						13 €	expenses as or	the following date:
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part : Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Doest Debtor 2 must file Official Form 1063-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No. Do not list Debtor 1 and Yes. Fill out this information for Debtor 2. Do not state the dependents names. Do not state the dependents names. Do your expenses include expenses of people other than yourself and your dependents: No. Yes N	Unite	ed States Bankr	ruptcy Court for the:	NORTH	ERN DISTRICT OF ILLIN	OIS		MM	/ DD / YYYY	
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1:	1									
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1:	Of	ficial Fo	rm 106J							
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1:	Sc	hedule	J: Your I	Expen	ses					12/1
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Page No No No No No Yes So your expenses include expenses of people other than yourself and your dependents? Stimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)	Be a info nun	as complete a rmation. If m nber (if know	and accurate as ore space is ned n). Answer ever	possible. eded, atta y question	If two married people ar ch another sheet to this					
No. Go to line 2.				hold						
No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No No	••	_								
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2 No Pes. Fill out this information for Debtor 2 Dependent's relationship to Debtor 2 Dependent's age No Pes. Pes. No Pes. No Pes.		Yes. Doe	s Debtor 2 live i	n a separa	ate household?					
Do not list Debtor 1 and Debtor 2. Do not state the dependents names. No Yes No Yes No Yes No Yes No Yes Satinate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) The rental or home ownership expenses for your residence, Include first mortgage				st file Officia	al Form 106J-2, <i>Expense</i> s	s for Separate House	ehold of De	ebtor 2	<u>.</u>	
Do not list Debtor 1 and Debtor 2. Do not state the dependents names. No Yes No Yes No Yes No Yes No Yes Satinate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) The rental or home ownership expenses for your residence, Include first mortgage	2.	Do you have	e dependents?	■ No						
dependents names. Yes No No Yes Yes No Yes		Do not list D	-	_					•	
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : Your Income (Official Form 106L) Your expenses										= ::-
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) Your expenses		aepenaents	names.							= :
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106L) 4. The rental or home ownership expenses for your residence, include first mortgage										— · · · ·
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) Your expenses										
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.)										
expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4 The rental or home ownership expenses for your residence, include first mortgage										
Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4 The rental or home ownership expenses for your residence, include first mortgage	3.	expenses o	f people other th	han $_{\square}$						
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) Your expenses	Port				v Evnoncos					
the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4 The rental or home ownership expenses for your residence. Include first mortgage	Esti exp	mate your ex enses as of a	cpenses as of yo	our bankru	iptcy filing date unless y					
4 The rental or home ownership expenses for your residence. Include first mortgage	the	value of sucl	h assistance and	•	-	•			Your expe	enses
4. The rental or home ownership expenses for your residence. Include first mortgage	(0	1010111 01111 10	,,,,							
payments and any rent for the ground or lot. 4. \$	4.					nclude first mortgage	e 4.	\$		1,045.00
If not included in line 4:		If not includ	led in line 4:							
4a. Real estate taxes 4a. \$ 0.00		4a. Real e	estate taxes				4a.	\$		0.00
4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00		4b. Prope	rty, homeowner's				4b.	\$		
4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00										
4d. Homeowner's association or condominium dues 4d. \$ 0.00 5. Additional mortgage payments for your residence, such as home equity loans 5. \$ 0.00	5.					me equity loans		· —		

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Debtor Debtor		A Butler te D Butler	Case num	ber (if known)	
. Ut	tilities:				
6a	a. Electricity	v, heat, natural gas	6a.	\$	350.00
6b	o. Water, se	ewer, garbage collection	6b.	\$	0.00
60	c. Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	340.00
60	d. Other. Sp	pecify:	6d.	\$	0.00
Fo	ood and hous	sekeeping supplies	7.	\$	600.00
Cł	hildcare and	children's education costs	8.	\$	0.00
CI	lothing, laund	dry, and dry cleaning	9.	\$	250.00
. Pe	ersonal care	products and services	10.	\$	200.00
. Ме	edical and de	ental expenses	11.	\$	375.00
		Include gas, maintenance, bus or train fare.		·	
	o not include o		12.	\$	390.00
B. Er	ntertainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
. Cł	haritable conf	tributions and religious donations	14.	\$	0.00
j. In	surance.				
		nsurance deducted from your pay or included in lines 4 or 20			
	5a. Life insura		15a.	·	0.00
15	5b. Health ins	surance	15b.	\$	0.00
15	5c. Vehicle in	nsurance	15c.	\$	133.00
15	d. Other insu	urance. Specify:	15d.	\$	0.00
i. Ta	axes. Do not in	nclude taxes deducted from your pay or included in lines 4 o			
	pecify:		16.	\$	0.00
		lease payments:		•	
		nents for Vehicle 1	17a.	·	504.00
		nents for Vehicle 2	17b.	·	0.00
	c. Other. Sp		17c.	·	0.00
	d. Other. Sp		17d.	\$	0.00
		s of alimony, maintenance, and support that you did not		œ.	0.00
		your pay on line 5, Schedule I, Your Income (Official Fo	m 106l). 18.	·	
		s you make to support others who do not live with you.	40	\$	400.00
		Debor's Disabled parent	19.	_	
		perty expenses not included in lines 4 or 5 of this form o			0.00
	0 0	es on other property	20a.		0.00
	b. Real esta		20b.		0.00
		homeowner's, or renter's insurance	20c.	·	0.00
		nce, repair, and upkeep expenses	20d.	·	0.00
		ner's association or condominium dues	20e.	\$	0.00
. 01	ther: Specify:		21.	+\$	0.00
C:	alculate vour	monthly expenses			
	2a. Add lines 4	·		\$	4.637.00
		22 (monthly expenses for Debtor 2), if any, from Official Form	106.1-2	\$	4,037.00
			1 1000 2		4 007 00
22	zc. Add line 22	2a and 22b. The result is your monthly expenses.		\$	4,637.00
3. C a	alculate your	monthly net income.			
	-	12 (your combined monthly income) from Schedule I.	23a.	\$	4,639.00
		ir monthly expenses from line 22c above.	23b.		4,637.00
	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ,			-,
23	Bc. Subtract y	your monthly expenses from your monthly income.			0.00
		t is your <i>monthly net income</i> .	23c.	\$	2.00
Fo	or example, do y	an increase or decrease in your expenses within the year ou expect to finish paying for your car loan within the year or do you exterms of your mortgage?	ar after you file this expect your mortgage	s form? payment to increas	e or decrease because of a
		Evalain hara:			
\Box	l Yes.	Explain here:			

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Fill in this	s information to identify your	case:		
Debtor 1	Steven A Butler			
DODIOI 1	First Name	Middle Name	Last Name	
Debtor 2	Charlotte D Butle	r		
(Spouse if, fill	ing) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS	
Case num	nber			
(if known)				☐ Check if this is an amended filing
Decla			I Debtor's Sched	
obtaining		n connection with a bar		g a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20
Did y	you pay or agree to pay some	one who is NOT an atto	orney to help you fill out bankrup	tcy forms?
	No			
	Yes. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	r penalty of perjury, I declare hey are true and correct.	that I have read the sui	nmary and schedules filed with t	his declaration and
X /s	s/ Steven A Butler		X /s/ Charlotte D Bu	utler
	Steven A Butler		Charlotte D Butle	~
S	Signature of Debtor 1		Signature of Debtor	2
D	Date February 18, 2017		Date February 1	8, 2017

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Fill in this inforn	nation to identify your cas	e:			
Debtor 1	Steven A Butler First Name	Middle Name	Last Name		
Debtor 2 Spouse if filing)	Charlotte D Butler First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the: N	ORTHERN DISTRICT	OF ILLINOIS		
Case number fknown)					Check if this is an amended filing
Official Form		Individual	Debtor's Sched	ules	12/15
			**		
two married pe	opie are ming together, b	oth are equally respo	nsible for supplying correct info	milation.	
btaining money	s form whenever you file k or property by fraud in co 8 U.S.C. §§ 152, 1341, 1519	onnection with a bank	s or amended schedules. Making kruptcy case can result in fines i	a false statement, co up to \$250,000, or imp	oncealing property, or orisonment for up to 20
Sign	n Below				
Did you pay	y or agree to pay someon	e who is NOT an attor	rney to help you fill out bankrupt	tcy forms?	
■ No					
☐ Yes. N	lame of person				etition Preparer's Notice. nature (Official Form 119)
that they are X Steven	Ity of perjury, I declare that true and correct. A Butler re of Debtor 1	it I have read the sum	X Charlotte D Butle Signature of Debtor 2	er (<u>`</u>

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Date February 18, 2017

Date February 18, 2017

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Fil	l in this inform	nation to identify you	r case:			
De	btor 1	Steven A Butler				
D0	btor 2	First Name	Middle Name	Last Name		
	ouse if, filing)	Charlotte D Butl	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
		., .,				
	se number nown)					Check if this is an amended filing
St Be	as complete a	of Financial	ble. If two married people		Bankruptcy equally responsible for sup y additional pages, write yo	
nur	nber (if knowr	n). Answer every que		·	y additional pages, illino ye	ui namo una cuco
1.	What is your	current marital statu	ıs?			
	■ Married□ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	□ No ■ Yes. Lis	t all of the places you l	ived in the last 3 years. Do r	not include where you live no	N.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
	323 S. Lan Palatine, II	celot Lane _ 60074	From-To: 8/2008~1/31/2	Same as Debtor	1	Same as Debtor 1 From-To:
	es and territori No Yes. Ma	es include Arizona, Ca ke sure you fill out Scl	lifornia, Idaho, Louisiana, Ne	evada, New Mexico, Puerto F	nity property state or territor tico, Texas, Washington and \	
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	u received from all jobs and	ng a business during this y all businesses, including par- ve together, list it only once u		endar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$7,076.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	
Offic	cial Form 107		Statement of Financial Af	ffairs for Individuals Filing for E	Bankruptcy	page '

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Debtor 2 Charlotte D Butler			Butler	Case number (if known)								
					Debtor 1 Sources of Check all the		(before	s income re deductions a sions)	nd	Debtor 2 Sources of inco Check all that ap		Gross income (before deductions and exclusions)
		alendar I to Dec		31, 2016)	■ Wages, bonuses, ti	commissions,		\$45,540.	.00	■ Wages, combonuses, tips	missions,	\$17,571.00
					☐ Operatir	ng a business				☐ Operating a b	ousiness	
				ore that: 31, 2015)	■ Wages, bonuses, ti	commissions,		\$42,187.	.00	■ Wages, combonuses, tips	missions,	\$28,346.00
					☐ Operatir	ng a business				☐ Operating a b	ousiness	
	winnin	gs. İf yo ıch sour lo	ou are filir	ng a joint cas	se and you ha	ave income that	you recei	ived together, li	st it on	at you listed in line	btor 1.	d gambling and lottery
					Debtor 1					Debtor 2		
					Sources of Describe be		each (before	s income from source re deductions a sions)		Sources of inco	ome	Gross income (before deductions and exclusions)
			of curren I for ban	t year until kruptcy:				\$0.	.00	Disability Ber	nefits	\$5,385.00
Par 6.						e You Filed for		•				
.	_	lo. Ne ind	either De dividual p	btor 1 nor D rimarily for a	Debtor 2 has personal, far	primarily consumily, or househo	umer del old purpos	bts. Consumer se."				(8) as "incurred by an
			iring the t	90 days befo Go to line 7	-	or bankruptcy, d	lid you pa	ly any creditor a	a total	of \$6,425* or mor	e?	
] _{Yes}	List below e paid that cre not include	each creditor editor. Do no payments to	t include paymer an attorney for t	nts for do this bankı	mestic support ruptcy case.	obliga		ld support a	ne total amount you nd alimony. Also, do
	■ Y					primarily consu or bankruptcy, d			a total	of \$600 or more?		
			No.	Go to line 7	.							
			Yes	List below e	each creditor	mestic support o				the total amount yort and alimony. A		creditor. Do not nclude payments to an
	Credi	itor's N	ame and	Address		Dates of payme	ent	Total amour		Amount you still owe	Was this p	ayment for

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Steven A Butler

Debtor	Charlotte D Butler		Cas	se number (if known)		
<i>Ins</i> of a I	lithin 1 year before you filed for bankru isiders include your relatives; any general f which you are an officer, director, person business you operate as a sole proprietor imony.	partners; relatives of any gen in control, or owner of 20% (neral partners; partners or more of their voting	erships of which yog g securities; and a	u are a general ny managing ag	partner; corporation gent, including one fo
	No Yes. List all payments to an insider.					
	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
in	/ithin 1 year before you filed for bankrunsider? Include payments on debts guaranteed or continue.				ccount of a de	bt that benefited an
	No					
	Yes. List all payments to an insider					
Ir	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment tor's name
Part 4	Identify Legal Actions, Repossess	ions, and Foreclosures				
Lis	Ithin 1 year before you filed for bankrust all such matters, including personal injudifications, and contract disputes.					
	No Yes. Fill in the details.					
_	Case title Case number	Nature of the case	Court or agency		Status of the	e case
	/ithin 1 year before you filed for bankru heck all that apply and fill in the details be		erty repossessed, f	oreclosed, garnis	shed, attached	, seized, or levied?
	No. Go to line 11. Yes. Fill in the information below.					
С	Creditor Name and Address	Describe the Property	Describe the Property			Value of the property
		Explain what happene	d			
	/ithin 90 days before you filed for bank ccounts or refuse to make a payment b ■ No		cluding a bank or fii	nancial institutior	ı, set off any aı	mounts from your
	Yes. Fill in the details.					
C	Creditor Name and Address	Describe the action th	e creditor took	Date taker	action was	Amount
	/ithin 1 year before you filed for bankru ourt-appointed receiver, a custodian, o		erty in the possess	ion of an assigne	e for the bene	fit of creditors, a
	No Yes					
Part 5	List Certain Gifts and Contribution	ns				
13. W	/ithin 2 years before you filed for bankr ■ No	ruptcy, did you give any gif	ts with a total value	of more than \$60	0 per person?	
	Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$60 per person	Describe the gifts		Dates the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

Debtor 1

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Debtor 1 Steven A Butler

Deb	ctor 2 Charlotte D Butler			Case number (if known)	
14.	Within 2 years before you filed for bankro ■ No □ Yes. Fill in the details for each gift or co			ns with a tota	value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed		Dates you contributed	Value
Part	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did	you lose anyt	ning because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the I the amount that insurance has paid. I ce claims on line 33 of Schedule A/B:	List pending	Date of your loss	Value of property lost
Part	t 7: List Certain Payments or Transfers	.				
	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or purchased include any attorneys, bankruptcy petition purchased in No	oreparin	g a bankruptcy petition?			rty to anyone you
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou '	Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment
	The Law Offices of Nella E. Mariani, 600 S. County Line Road, Suite 2N Bensenville, IL 60106	P.C	Attorney Fees		02/11/2017	\$300.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that No Yes. Fill in the details.	litors or	to make payments to your creditor	r behalf pay o rs?	r transfer any prope	rty to anyone who
	Person Who Was Paid Address		Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankru transferred in the ordinary course of you Include both outright transfers and transfers include gifts and transfers that you have alrest No Yes. Fill in the details.	r busine made a	ess or financial affairs? as security (such as the granting of a s			
	Person Who Received Transfer Address Person's relationship to you		Description and value of property transferred		nny property or received or debts change	Date transfer was made

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Debtor 1 Steven A Butler
Debtor 2 Charlotte D Butler

Case number (if known)

19.	within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protein No.		rty to a self-set	tled trust or similar device o	of which you are a
	Yes. Fill in the details.				
	Name of trust	Description and value of	the property tra	nsferred	Date Transfer was made
Pa	List of Certain Financial Accounts, Insti	ruments, Safe Deposit Boxes,	and Storage U	nits	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accounts; cert	ificates of depo	, ,	, ,
	Yes. Fill in the details.				
		Last 4 digits of Type of instru	of account or ment	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ar before you filed for bankru	ptcy, any safe o	deposit box or other deposi	tory for securities,
	No Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it Address (Number, Street, City, State and ZIP Code)		oe the contents	Do you still have it?
22.	Have you stored property in a storage unit or	,	vithin 1 year be	fore you filed for bankruptc	y?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had acce to it? Address (Number, Street, City, State and ZIP Code)		pe the contents	Do you still have it?
Pai	rt 9: Identify Property You Hold or Control fo	or Someone Else			
23.	Do you hold or control any property that som for someone.	eone else owns? Include any	property you b	orrowed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and Z Code)		pe the property	Value
Pai	rt 10: Give Details About Environmental Infor	mation			
	the purpose of Part 10, the following definition				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface water,	groundwater, c		
	Site means any location, facility, or property a to own, operate, or utilize it, including dispos	as defined under any environr		ether you now own, operate	, or utilize it or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, o		ardous waste,	hazardous substance, toxic	substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Steven A Butler
Debtor 2 Charlotte D Butler

Case number (if known)

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?				
	No Silvi di La il				
	Yes. Fill in the details.				5
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	y release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admini	istrative proceeding under any en	vironi	mental law? Include settlements ar	nd orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Par	11: Give Details About Your Business or Cor	nnections to Any Business			
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	any of	f the following connections to any	business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	y, eith	ner full-time or part-time	
	☐ A member of a limited liability company	y (LLC) or limited liability partners	ship (L	LP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing execu	tive of a corporation			
	☐ An owner of at least 5% of the voting or	r equity securities of a corporation	n		
	No. None of the above applies. Go to Part	: 12.			
	☐ Yes. Check all that apply above and fill in t	the details below for each busines	ss.		
		escribe the nature of the business	6	Employer Identification number	
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN. Dates business existed	
28.	Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties.	did you give a financial statemen	t to aı		le all financial
	No				
	Yes. Fill in the details below.				
	Name Address (Number, Street, City, State and ZIP Code)	ate Issued			

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Debtor 1	Steven A Butler		•	
Debtor 2	Charlotte D Butl	er	Case num	nber (if known)
Part 12: 8	Sign Below			
I have read	the answers on th	s Statement of Financial Affairs a	nd any attachments, and I declare	e under penalty of perjury that the answers
			•	ig money or property by fraud in connection
		sult in fines up to \$250,000, or im		
18 U.S.C. §§	§ 152, 1341, 1519, a	nd 3571.		
/s/ Steven	A Dutler	lol Ch	orlette D. Butler	
			arlotte D Butler	
Steven A			otte D Butler	
Signature of	of Debtor 1	Signa	ture of Debtor 2	
Date Feb	oruary 18, 2017	Date	February 18, 2017	
Did vou atta	ach additional page	es to Your Statement of Financial	Affairs for Individuals Filing for B	ankruptcv (Official Form 107)?
□ No	p			
■ Yes				
Did you pay	or agree to pay so	omeone who is not an attorney to	help you fill out bankruptcy form	s?
■ No				
☐ Yes. Nam	ne of Person	. Attach the Bankruptcv Petition Pre	parer's Notice. Declaration, and Sig	nature (Official Form 119).

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Debtor 1 Steven A Butler
Debtor 2 Charlotte D Butler

Case number (if known)

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

Steven A Butler Signature of Debtor 1

Charlotte D Butler Signature of Debtor 2

Date February 18, 2017

Date February 18, 2017

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No □ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of Person Attach the Bankruptcy Petition Preparer's Notice. Declaration, and Signature (Official Form 119).

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Steven A Butler			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Charlotte D Butle	Middle Name	Last Name	
	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Office Grates B	ankruptcy Court for the.	NOITHERN DIO	THE ST ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing
	nt of Intentio		riduals Filing Under Chapte	er 7 12/15
	dividual filing under chap ve claims secured by yo		out this form if:	
you have lea You must file th	ised personal property a his form with the court w lever is earlier, unless th	nd the lease has n ithin 30 days after	ot expired. you file your bankruptcy petition or by the date s e time for cause. You must also send copies to th	
	people are filing together and date the form.	in a joint case, bo	th are equally responsible for supplying correct in	nformation. Both debtors must
	and accurate as possib your name and case nun		s needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Y	Your Creditors Who Have	Secured Claims		
	itors that you listed in Pa		: Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
	reditor and the property the	nat is collateral	What do you intend to do with the property tha secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's I name:	Ron's Auto Sales		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description o	f STS 2009 Cadillac	150,000 miles	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt	t:		Retain the property and [explain]:	
For any unexpir in the information	on below. Do not list rea	se that you listed I estate leases. Un	in Schedule G: Executory Contracts and Unexpirexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)	ne lease period has not yet ended.
Describe your	unexpired personal prop	erty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of le Property:	eased			☐ Yes
Lessor's name:				□ No
Description of le Property:	eased			☐ Yes
Lessor's name:				
Official Form 108	3	Statement of In	tention for Individuals Filing Under Chapter 7	page 1

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Debtor 1 Debtor 2	Steven A Butler Charlotte D Butler	Case number (if known)
Description Property:	on of leased	□ No
Lessor's i Description Property:	name: on of leased	□ No
Lessor's i Description Property:	name: on of leased	□ No □ Yes
Lessor's i Description Property:	name: on of leased	□ No □ Yes
Lessor's i Description Property:	name: n of leased	□ No □ Yes
Under pei	Sign Below nalty of perjury, I declare that I have indicate hat is subject to an unexpired lease.	d my intention about any property of my estate that secures a debt and any personal
Ste	Steven A Butler ven A Butler ature of Debtor 1	X /s/ Charlotte D Butler Charlotte D Butler Signature of Debtor 2
Date	February 18, 2017	Date February 18, 2017

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Debtor 1 Debtor 2	Steven A Butler Charlotte D Butler	Case number (if known)
Description Property:	n of leased	□ No
		☐ Yes
Lessor's na	ame: n of leased	□ No
Property:		☐ Yes
Lessor's na	ame: n of leased	□ No
Property:		☐ Yes
Lessor's na		□ No
Property:	1010000	☐ Yes
Lessor's na		□ No
Property:	i oi icascu	☐ Yes
Part 3:	Sign Below	
Jnder pen	alty of perjury, I declare that I have indicated to the subject to an unexpired lease.	my intention about any property of my estate that secures a debt and any personal
Χ (Μ) Stev	en A Butler ture of Debtor 1	X Charlotte D Butler Signature of Debtor 2
Date	February 18, 2017	Date February 18, 2017

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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2-18-20A

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In		A Butler e D Butle	r		Case No.				
	_ Charlott	e D Butte	·1	Debtor(s)	Chapter	7			
		DISCL	OSURE OF COMP	PENSATION OF ATTOR	NEY FOR DE	EBTOR(S)			
١.	compensation	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:							
	For legal services, I have agreed to accept Prior to the filing of this statement I have received		have agreed to accept		\$	300.00			
					300.00				
	Balance	Due			. \$	0.00			
2.	\$ <u>335.00</u>	of the filin	ng fee has been paid.						
3.	The source of	the compe	nsation paid to me was:						
	■ Deb	or \Box	Other (specify):						
1.	The source of	compensat	tion to be paid to me is:						
	■ Deb	or 🗆	Other (specify):						
5.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.								
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.								
ó .	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:								
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;c. [Other provisions as needed]								
7.				I fee does not include the following s ceeding or any other contested		oping.			
				CERTIFICATION	_				
this	I certify that t s bankruptcy pro		ng is a complete statement of	any agreement or arrangement for pa	ayment to me for re	epresentation of the de	ebtor(s) in		
	February 18, 2017			/s/ Nella E. Mariani					
Date				Nella E. Mariani 62 Signature of Attorney	57570				
				The Law Offices of		, P.C.			
				600 S County Line					
				Bensenville, IL 601 (312) 307-9411 Fax		1			
				nellaep@aol.com					
				Name of law firm					

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PRE-PETITION CHAPTER 7 RETAINER AGREEMENT

I/WE HEREBY RETAIN AND EMPLOY THE LAW OFFICES OF NELLA E. MARIANI, P.C.
TO HANDLE MY/OUR CHAPTER 7 BANKRUPTCY. I/WE UNDERSTAND THAT THE FOLLOWING
SERVICES WILL BE PROVIDED:

- 1. Initial interview-Explanation of Chapter 7 & Chapter 13 Procedures, evaluation of the clients's financial situation to determine feasibility of filing Chapter 7 or Chapter 13, overview and discussion of various options, Preparation of Bankruptcy Petition & Schedules, Assistance in procurement of mandatory creditor counseling certificate, obtain a credit report, Filing of Petition and Schedules with the Bankruptcy Court. The above representation is completed upon filing the filing of Bankruptcy Petition and Schedules with the bankruptcy court and said agreement is terminated.
- 2. For said representation, Client (s) agree to pay a retainer fee in the amount of \$\(\subseteq \circ O \circ \circ O \circ
- 3. Client acknowledges that both parties, The Law Offices of Nella E. Mariani, P.C. and Client(s) enter into this agreement with an understanding that this contract is completed and terminated upon the filing of the petition and Client (s) agrees to enter a second contract for post-petition legal services related to his/her bankruptcy case. Cient(s) further understand that neither the above named law office nor Client(s) are under any obligation to enter in said second agreement and Client may choose to find other representation or represent himself/herself. If Client(s) choose to have THE LAW OFFICES OF NELLA E. MARIANI, P.C. as their representation for post-petition legal services, client agrees to enter in said agreement.

I HEREBY CERTIFY THAT I HAVE READ THIS AGREEMENT IN ITS ENTIRETY:

1.1.

Client(s)

LAW OFFICES OF NELLA E. MARIANI, P.C.

Nella E. Mariani

United States Bankruptcy Court Northern District of Illinois

In re	Steven A Butler Charlotte D Butler		Case No.			
	- Sharrotte & Butter	Debtor(s)	Chapter 7			
	VE	RIFICATION OF CREDITOR M		-		
		Number of Creditors:		56		
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best (our) knowledge.					
Date:	February 18, 2017	/s/ Steven A Butler				
		Steven A Butler				
		Signature of Debtor				
Date:	February 18, 2017	/s/ Charlotte D Butler				
		Charlotte D Butler				
		Signature of Debtor				

American Infosource LP as Agent for Midland Funding P.O. Box 268941 Oklahoma City, OK 73126

American Infosource LP as Agent for Midland Funding P.O. Box 268941 Oklahoma City, OK 73126

American Web Loan, Inc. 2128 North 14th Street, #1 Box 130 Ponca City, OK 74601

AmeriCash Loans P.O. Box 184 Des Plaines, IL 60016

AmeriCashLoans.Net P.O. Box 184 Des Plaines, IL 60016

Arlington Ridge Pathology 520 E. 22nd St. Lombard, IL 60148

Armor Systems 1700 Kiefer Drive, Suite 1 Zion, IL 60099

Aspire Visa c/o Capital Management Services, LP 698 1/2 South Ogden Street Buffalo, NY 14206

AT & T P.O. Box 8100 Aurora, IL 60507

AT & T P.O. Box 5080 Carol Stream, IL 60197 AT & T Mobility P.O. Box 6146 Carol Stream, IL 60197

AT & T Mobility c/o AT & T Services One AT & T Way, Suite 3A 104 Bedminster, NJ 07921

BestPractices of Northwest. SC P.O. Box 758682 Baltimore, MD 21275

Cash Direct Express c/o Alliance Asset P.O. Box 1259 Oaks, PA 19456

CEPAmerica Illinois LLP P.O. Box 582663 Modesto, CA 95358

Cerastes, LLC c/o Weinstein, Pinson, & Riley 2001 Western Ave., Suite 400 Seattle, WA 98121

Charter Bank c/o Universal Fidelty, LP P.O. Box 219785 Houston, TX 77218

City of Chicago c/o Linegarger, Goggan, Blair, et al P.O. Box 06152 Chicago, IL 60606

Comcast Cable P.O. Box 3002 Southeastern, PA 19398

Commonwealth Edison Attn: Bankruptcy Dept. 3 Lincoln Centre Oak Brook Terrace, IL 60181 Condell Medical Center c/o Harris & Harris, LTD 111 W. Jackson Blvd. Suite 400 Chicago, IL 60604

Diversified Consultant P O Box 551268
Jacksonville, FL 32255

Harris 111 West Jackson Boulevard Chicago, IL 60604

Illinois Department of Revenue Attn: Bankruptcy Dept. P.O. Box 64338 Springfield, IL 62794

Illinois Dept. of Employment Sec. P.O. Box 4385 Chicago, IL 60680

IRS
Special Procedures
P.O. Box 7346
Philadelphia, PA 19101

Jefferson Capital Systems P.O. Box 7999 Saint Cloud, MN 56302

LVNV Funding LLC c/o Northland Group P.O. Box 390846 Minneapolis, MN 55439

Mark Bamba 323 S. Lancelot Lane Palatine, IL 60074

Medical Recovery Specialist Inc 2250 E. Devon Aven., Suite 352 Des Plaines, IL 60018

Nicor Gas c/o Harris & Harris, LTD 111 West Jackson Blvd., Suite 400 Chicago, IL 60604

Nicor Gas P.O Box 5407 Carol Stream, IL 60197

Northwest Community Hosp c/o Ronald J. Henning, P.C. P.O. Box 4106 Saint Charles, IL 60174

Northwest Community Hospital c/o Harris & Harris, LTD 111 West Jackson Blvd., Suite 400 Chicago, IL 60604

Northwest Community Hospital 28079 Network Place Chicago, IL 60673

Northwest Community Hospital c/o MiraMed Revenue Group 991 Oak Creek Drive Lombard, IL 60148

Northwest Community Hospital c/o Stanislaus Credit Control Servi 914 14th Street Modesto, CA 95353

Northwest Community Pain Center 880 W. Central Road, Suite 3800 Arlington Heights, IL 60005

Northwest Radiology Associates 520 E. 22nd St Lombard, IL 60148

Northwest Suburban Pain Center 880 W. Central Rd., Suite 3800 Arlington Heights, IL 60005

Peoples Gas Light & Coke c/o Bankruptcy Dept. 200 E. Randolph Drive Chicago, IL 60601

Peoples Gas Light & Coke Co 200 E Randolph Drive Chicago, IL 60601

Ron's Auto Sales 1119 W. Roosevelt Road Maywood, IL 60153

Santander Consumer USA c/o Capital Management Service, LP 698 1/2 S. Ogden Street Buffalo, NY 14206

Santander Consumer USA c/o Portfolio Recovery Assoc. P.O. Box 4115 Concord, CA 94524

Silver Cloud Financial, Inc. 635 East Hwy 20, C Upper Lake, CA 95485

SRA Associates P.O. Box 4115 Concord, CA 94524

Sure Advance c/o P.O Box 1259 Oaks, PA 19456

System & Services Technologies, Inc 4315 Pickett Road Saint Joseph, MO 64503

T-Mobile c/o Diversified Consultants P.O. Box 571 Fort Mill, SC 29716 TCF c/o Heller & Frisone, Attorneys 33 N LaSalle St., Suite 1200 Chicago, IL 60602

US Bank Attn: Bankruptcy Dept. 1555 N. Rand Road Palatine, IL 60074

US Department of Education P.O. Box 16448 Saint Paul, MN 55116

Wells Fargo Attn: Bankruptcy Dept. 621 W. Dundee Road Palatine, IL 60074

Wells Fargo Bank c/o P.O. Box 129 Thorofare, NJ 08086

Wells Fargo Bank P.O. Box 5058 Portland, OR 97208